

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**Midland Credit Management, Inc.
d/b/a Midland Funding, LLC
Attn: James Black, CEO
320 East Big Beaver Road, Suite 300
Troy, MI 48083-1271**



9590 9402 4558 8278 2793 79

2. Article Number (Transfer from service label)

7018 0360 0002 2363 7059

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
 Addressee

B. Received By (Printed Name)

C. Date of Delivery

5/3/19

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- | | |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <small>all
all Restricted Delivery</small> | |

PS Form 381-1, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com .	
OFFICIAL USE	
TROY MI 48083	
Certified Mail Fee \$3.50	
\$ <input type="text" value="3.50"/>	
Extra Services & Fees (check box, add fee to total amount)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="text" value="0.00"/>	
<input type="checkbox"/> Return Receipt (electronic) \$ <input type="text" value="0.00"/>	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="text" value="0.00"/>	
<input type="checkbox"/> Adult Signature Required \$ <input type="text" value="0.00"/>	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ <input type="text" value="0.00"/>	
Postage \$0.55	
\$ <input type="text" value="0.55"/>	
Total Postage \$ <input type="text" value="4.05"/>	
05/08/2019	
Midland Credit Management, Inc.	
d/b/a Midland Funding, LLC	
Attn: James Black, CEO	
320 East Big Beaver Road, Suite 300	
Troy, MI 48083-1271	
PS Form 6	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**PRA Group, Inc. d/b/a
Portfolio Recovery Associates, LLC
Attn: Kevin Stevenson, CEO
120 Corporate Boulevard
Norfolk, VA 23502**



9590 9402 4558 8278 2797 82

2. Article Number (Transfer from service label)

7018 0360 0002 2363 6007

COMPLETE THIS SECTION ON DELIVERY**A. Signature****X**

Agent
 Addressee

B. Received by (Printed Name)**C. Date of Delivery**

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery.

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT																																																	
<i>Domestic Mail Only</i>																																																	
For delivery information, visit our website at www.usps.com .																																																	
NORFOLK, VA 23512																																																	
OFFICIAL USE																																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Certified Mail Fee</td> <td style="width: 15%;">\$3.50</td> <td style="width: 15%; text-align: right;">0011</td> </tr> <tr> <td>\$</td> <td>\$3.50</td> <td>11</td> </tr> <tr> <td colspan="2">Extra Services & Fees (check box, add fee to postage rate)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td colspan="2">Postage</td> <td>\$0.55</td> </tr> <tr> <td colspan="2">\$</td> <td>0.55</td> </tr> <tr> <td colspan="2">Total Postage</td> <td>\$4.05</td> </tr> <tr> <td colspan="2">Sent To</td> <td>PRA Group, Inc. d/b/a/SP</td> </tr> <tr> <td colspan="2">Street and A#</td> <td>Portfolio Recovery Associates, LLC</td> </tr> <tr> <td colspan="2">City, State, Z#</td> <td>Attn: Kevin Stevenson, CEO</td> </tr> <tr> <td colspan="2"></td> <td>120 Corporate Boulevard</td> </tr> <tr> <td colspan="2"></td> <td>Norfolk, VA 23502</td> </tr> </table>		Certified Mail Fee	\$3.50	0011	\$	\$3.50	11	Extra Services & Fees (check box, add fee to postage rate)			<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00		<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00		<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00		<input type="checkbox"/> Adult Signature Required	\$ 0.00		<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00		Postage		\$0.55	\$		0.55	Total Postage		\$4.05	Sent To		PRA Group, Inc. d/b/a/SP	Street and A#		Portfolio Recovery Associates, LLC	City, State, Z#		Attn: Kevin Stevenson, CEO			120 Corporate Boulevard			Norfolk, VA 23502
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FEB 19 2019																																																	
B2/19/2019																																																	
Postmark Here																																																	
PS Form 36																																																	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert Polas, Jr., Esquire
Portfolio Recovery Associates, LLC
120 Corporate Boulevard
Norfolk, VA 23502



9590 9402 4558 8278 2797 99

2. Article Number (Transfer from service label)

7016 0360 0002 2363 6014

COMPLETE THIS SECTION ON DELIVERYA. Signature

- Agent
 Addressee

B. Received by (Printed Name)

2363 6014

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collection Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| all Restricted Delivery | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com .	
NORFOLK, VA 23502	
OFFICIAL USE	
Certified Mail Fee	\$3.50
	\$2.80
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
	\$0.55
Total Postage	\$6.85
Robert Polas, Jr., Esquire	
Sent To	
Street/Unit	120 Corporate Boulevard
City/State	Norfolk, VA 23502
PS Form 3811	

0011
11
HILL
Postmark
Here
FEB 19 2019
02/19/2019
U.S. POSTAL SERVICE

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**Joshua McNamara, Esquire
Hayt, Hayt & Landau, LLC
2 Industrial Way West
Eaton, NJ 07724**



9590 9402 4558 8278 2797 51

2. Article Number (Transfer from service label)

7018 0360 0002 2363 6519

COMPLETE THIS SECTION ON DELIVERY**A. Signature** Agent
 Addressee**B. Received by (Printed Name)****C. Date of Delivery**

02/19/2019

**D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No****3. Service Type**

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collection Delivery Restricted Delivery
- Mail
- Mail Restricted Delivery
- Signature Confirmation
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only**For delivery information, visit our website at www.usps.com.

EATONTOWN, NJ 07724

OFFICIAL USE

Certified Mail Fee \$3.50

\$	42.80
S	Extra Services & Fees (check box, add fee as appropriate)
<input type="checkbox"/>	Return Receipt (hardcopy) \$ 40.00
<input type="checkbox"/>	Return Receipt (electronic) \$ 0.00
<input type="checkbox"/>	Certified Mail Restricted Delivery \$ 0.00
<input type="checkbox"/>	Adult Signature Required \$ 0.00
<input type="checkbox"/>	Adult Signature Restricted Delivery \$ 0.00

Postage \$0.55

S Total Postage \$43.35

S Sent To

Street and Ap

City, State, Z

**Joshua McNamara, Esquire
Hayt, Hayt & Landau, LLC
2 Industrial Way West
Eaton, NJ 07724**



02/19/2019

PS Form 3811

JMS

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cavalry SPV I, LLC
Attn: Timothy Stapleford, CEO
500 Summit Lake Drive, Suite 400
Valhalla, NY 10595



9590 9402 4558 8278 2797 20

2. Article Number (Transfer from service label)

7018 0360 0002 2363 7431

COMPLETE THIS SECTION ON DELIVERY**A. Signature****X** Agent Addressee**B. Received By (Printed Name)***H. Cole***C. Date of Delivery**

2/11

**D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No****3. Service Type**

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Mail
- Mail Restricted Delivery
- O
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT																															
<i>Domestic Mail Only</i>																															
For delivery information, visit our website at www.usps.com .																															
VALHALLA NY 10595																															
MAIL USE																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Certified Mail Fee</td> <td style="width: 15%; text-align: right;">\$ 3.50</td> <td style="width: 15%; text-align: right;">19</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">01/01/19</td> </tr> <tr> <td colspan="3" style="text-align: center;">FEB Postmark Here</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Return Receipt (hardcopy) \$ 0.20 <input type="checkbox"/> Return Receipt (electronic) \$ 0.00 <input type="checkbox"/> Certified Mail Restricted Delivery \$ 0.00 <input type="checkbox"/> Adult Signature Required \$ 0.00 <input type="checkbox"/> Adult Signature Restricted Delivery \$ 0.00 </td> <td style="text-align: right;">05/06/2019</td> </tr> <tr> <td colspan="2" style="text-align: center;">Postage</td> <td style="text-align: right;">\$ 0.55</td> </tr> <tr> <td colspan="2" style="text-align: center;">Total Postage</td> <td style="text-align: right;">\$ 6.85</td> </tr> <tr> <td colspan="2" style="text-align: center;">Sent To</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">Street and</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">City, State,</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center;">PS Form 3811</td> </tr> </table>		Certified Mail Fee	\$ 3.50	19			01/01/19	FEB Postmark Here			<input type="checkbox"/> Return Receipt (hardcopy) \$ 0.20 <input type="checkbox"/> Return Receipt (electronic) \$ 0.00 <input type="checkbox"/> Certified Mail Restricted Delivery \$ 0.00 <input type="checkbox"/> Adult Signature Required \$ 0.00 <input type="checkbox"/> Adult Signature Restricted Delivery \$ 0.00		05/06/2019	Postage		\$ 0.55	Total Postage		\$ 6.85	Sent To			Street and			City, State,			PS Form 3811		
Certified Mail Fee	\$ 3.50	19																													
		01/01/19																													
FEB Postmark Here																															
<input type="checkbox"/> Return Receipt (hardcopy) \$ 0.20 <input type="checkbox"/> Return Receipt (electronic) \$ 0.00 <input type="checkbox"/> Certified Mail Restricted Delivery \$ 0.00 <input type="checkbox"/> Adult Signature Required \$ 0.00 <input type="checkbox"/> Adult Signature Restricted Delivery \$ 0.00		05/06/2019																													
Postage		\$ 0.55																													
Total Postage		\$ 6.85																													
Sent To																															
Street and																															
City, State,																															
PS Form 3811																															
Cavalry SPV I, LLC Attn: Timothy Stapleford, CEO 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595		05/06/2019																													

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1. Article Addressed to:

Ralph Gulko, Esquire
Pressler, Felt & Warshaw, LLP
 7 Entin Road
 Parsippany, NJ 07054



9590 9402 4558 8278 2797 75

2. Article Number (Transfer from service label)

7018 0360 0002 2363 5994

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X
 Agent
 Addressee

B. Received by (Printed Name)

PRESSLER, FELT & WARSHAW, LLP

C. Date of Delivery

D. Is delivery address different from item 1? YesIf YES, enter delivery address below: No**PARSIPPANY NJ 07054-9044**

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

all
all Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only																											
For delivery information, visit our website at www.usps.com .																											
OFFICIAL USE																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Certified Mail Fee \$3.50</td> <td style="width: 50%; text-align: right;">0011</td> </tr> <tr> <td>\$ <input type="text" value="2.80"/></td> <td style="text-align: right;">11</td> </tr> <tr> <td colspan="2">Extra Services & Fees (check box, add fee to appropriate box)</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (handcopy) \$ <input type="text" value="0.00"/></td> <td style="text-align: right;">FEB 19 2019</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic) \$ <input type="text" value="0.00"/></td> <td style="text-align: right;">Postmark Here</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="text" value="0.00"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required \$ <input type="text" value="0.00"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery \$ <input type="text" value="0.00"/></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">Postage \$0.55</td> </tr> <tr> <td colspan="2" style="text-align: center;">\$ <input type="text" value="6.85"/></td> </tr> <tr> <td>Total Postage \$ <input type="text" value="6.85"/></td> <td style="text-align: right;">02/19/2019</td> </tr> <tr> <td colspan="2"> Sent To Ralph Gulko, Esquire Pressler, Felt & Warshaw, LLP Street and A City, State, Zip </td> </tr> <tr> <td colspan="2">PS Form 3811</td> </tr> </table>		Certified Mail Fee \$3.50	0011	\$ <input type="text" value="2.80"/>	11	Extra Services & Fees (check box, add fee to appropriate box)		<input type="checkbox"/> Return Receipt (handcopy) \$ <input type="text" value="0.00"/>	FEB 19 2019	<input type="checkbox"/> Return Receipt (electronic) \$ <input type="text" value="0.00"/>	Postmark Here	<input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="text" value="0.00"/>		<input type="checkbox"/> Adult Signature Required \$ <input type="text" value="0.00"/>		<input type="checkbox"/> Adult Signature Restricted Delivery \$ <input type="text" value="0.00"/>		Postage \$0.55		\$ <input type="text" value="6.85"/>		Total Postage \$ <input type="text" value="6.85"/>	02/19/2019	Sent To Ralph Gulko, Esquire Pressler, Felt & Warshaw, LLP Street and A City, State, Zip		PS Form 3811	
Certified Mail Fee \$3.50	0011																										
\$ <input type="text" value="2.80"/>	11																										
Extra Services & Fees (check box, add fee to appropriate box)																											
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PS Form 3811																											

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1. Article Addressed to:

Michael Ratchford, Esquire
 Ratchford Law Group, LC
 409 Lackawanna Avenue, Suite 320
 Scranton, PA 18503



9590 9402 4558 8278 2797 13

2. Article Number (Transfer from service label)

7018 0360 0002 2363 7455

COMPLETE THIS SECTION ON DELIVERY**A. Signature****X**
 Agent
 Addressee
 B. Received by (Printed Name)**C. Date of Delivery**
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No
3. Service Type

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

 Mail
 Mail-Restricted Delivery
 (D)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>															
For delivery information, visit our website at www.usps.com .															
SCRANTON, PA 18503															
OFFICIAL USE															
Certified Mail Fee \$3.50															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">\$</td> <td style="width: 90%;">47.80</td> </tr> <tr> <td colspan="2">Extra Services & Fees (check box, add fee as appropriate)</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ 0.00</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ 0.00</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ 0.00</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ 0.00</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ 0.00</td> </tr> </table>		\$	47.80	Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00	<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00	<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00	<input type="checkbox"/> Adult Signature Required	\$ 0.00	<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00
\$	47.80														
Extra Services & Fees (check box, add fee as appropriate)															
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00														
<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00														
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00														
<input type="checkbox"/> Adult Signature Required	\$ 0.00														
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00														
Postage \$0.55															
Total Post \$4.85															
Sent To Street and City, State, <small>PS Form</small>															
02/19/2019															
FEB 19 2019															
Postmark Here															
Actions															

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- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**David Apotheker, Esquire
Apotheker Scian, PC
520 Fellowship Road, Suite C306
Mount Laurel, NJ 08054**



9590 9402 4558 8278 2797 37

2. Article Number: (Transfer from service label)

7018 0360 0002 2363 7462

COMPLETE THIS SECTION ON DELIVERY**A. Signature***N. Ness*
 Agent
 Addressee
B. Received By (Printed Name)

2/19/19

C. Date of Delivery
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No
3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Mail
(Mail Restricted Delivery
JO)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT															
<i>Domestic Mail Only</i>															
For delivery information, visit our website at www.usps.com .															
MOUNT LAUREL, NJ 08054															
FEE PAYMENT															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Certified Mail Fee \$3.50</td> <td style="padding: 5px;">\$0.20</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">Extra Services & Fees (check box, add fee as appropriate)</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><input type="checkbox"/> Return Receipt (hardcopy) \$11.00</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><input type="checkbox"/> Return Receipt (electronic) \$0.00</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><input checked="" type="checkbox"/> Certified Mail Restricted Delivery \$0.00</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><input type="checkbox"/> Adult Signature Required \$0.00</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><input type="checkbox"/> Adult Signature Restricted Delivery \$0.00</td> </tr> </table>		Certified Mail Fee \$3.50	\$0.20	Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (hardcopy) \$11.00		<input type="checkbox"/> Return Receipt (electronic) \$0.00		<input checked="" type="checkbox"/> Certified Mail Restricted Delivery \$0.00		<input type="checkbox"/> Adult Signature Required \$0.00		<input type="checkbox"/> Adult Signature Restricted Delivery \$0.00	
Certified Mail Fee \$3.50	\$0.20														
Extra Services & Fees (check box, add fee as appropriate)															
<input type="checkbox"/> Return Receipt (hardcopy) \$11.00															
<input type="checkbox"/> Return Receipt (electronic) \$0.00															
<input checked="" type="checkbox"/> Certified Mail Restricted Delivery \$0.00															
<input type="checkbox"/> Adult Signature Required \$0.00															
<input type="checkbox"/> Adult Signature Restricted Delivery \$0.00															
Postage \$0.55															
Total Postage \$6.85															
Sent To Street and Ap City, State, Zip															
David Apotheker, Esquire Apotheker Scian, PC 520 Fellowship Road, Suite C306 Mount Laurel, NJ 08054															
PS Form 3811															

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Capital One Bank (USA), NA
Attn: Richard Fairbank, CEO
4851 Cox Road
Glen Allen, VA 23060



9590 9402 4558 8278 2797 06

2. Article Number / Transfer from service label

7018 0360 0002 2363 7448

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

- Agent
 Addressee

B. Received by (Printed Name)**C. Date of Delivery****D. Is delivery address different from item 1?** Yes
If YES, enter delivery address below:**FEB 22 2019****3. Service Type**

- Adult Signature *✓*
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

- Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Bill
Bill Restricted Delivery

Domestic Return Receipt

7018 0360 0002 2363 7448

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only**For delivery information, visit our website at www.usps.com.

GLEN ALLEN, VA 23060

OFFICIAL USE

Certified Mail Fee \$3.50

0011

\$ 4.20

11

Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00
<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00
<input type="checkbox"/> Adult Signature Required	\$ 0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00

Postage \$0.55

FEB 19 2019
02/19/2019

Total Postage \$ 6.85

Sent To

Capital One Bank (USA), NA

Street and A

Attn: Richard Fairbank, CEO

City, State,

4851 Cox Road

Glen Allen, VA 23060

PS Form 8

ons

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

New Century Financial Services, Inc.
Attn: Eric Sombers, CEO
110 South Jefferson Street, Suite 104
Whippany, NJ 07981



9590 9402 4558 8278 2797 68

2. Article Number (Transfer from service label)

7018 0360 0002 2363 5987

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> |
| <input type="checkbox"/> Mail Restricted Delivery | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

WHIPPANY, NJ 07981

OFFICIAL USE

Certified Mail Fee \$3.50

\$	4.80
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00
<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00
<input type="checkbox"/> Adult Signature Required	\$ 0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00

Postage \$0.55

Total Postage

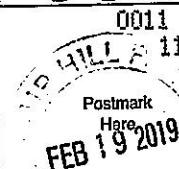
\$ 4.85

New Century Financial Services, Inc.

Attn: Eric Sombers, CEO

110 South Jefferson Street, Suite 104

Whippany, NJ 07981



02/19/2019

PS Form 3

Jons